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COVER LETTER

TO:	Amendment Section Division of Corporations
SUB	IECT: 1st Choice Insurance of Florida, Inc
	(Name of Corporation)
DOC	UMENT NUMBER: P05000122974
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	e return all correspondence concerning this matter to the following:
Inal	vis Roque
	(Name of Person)
1st	Choice Insurance of Florida, Inc
	(Name of Firm/Company)
326	0 W Hillsborough Ave Suite# 105
	(Address)
Tan	npa, FL 33614
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
Inalv	ris Roque at (813) 871-3430 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis Clifto 2661	Mailing Address: Amendment Section Amendment Section Division of Corporations on Building Executive Center Circle hassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Victor Zamora	, hereby resign as VP
	(Title)
of 1st Choice Insurance o	f Florida, Inc
	(Name of Corporation)
P05000122974	a corporation organized under the laws of the State of
(Document Number, if know	<u>n)</u>
Florida	

7-23-08 (Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314